

# City of St. Charles

## Kitchen Remodel



Building Zoning Division  
2 East Main Street  
St. Charles IL 60174  
630.377.4406 (Office)  
630.443.4638 (Fax)  
<http://www.stcharlesil.gov>

*Please direct any and all questions to the City of St. Charles Building Zoning Division:  
Monday (8 AM to 7 PM) Tuesday through Friday (8 AM to 4:30 PM) at 630.377.4406*

A building permit is required prior to any construction or alteration in your kitchen. The following are guidelines and comments for obtaining a building permit.

### **Application and Drawings Procedures:**

- ▶ An application is to be filled out and submitted to the Building Department. The contractors names, addresses, phone numbers and, if required, their license numbers are to be filled out when submitting the application.
- ▶ Two (2) sets of drawings showing the construction details for the remodel in your kitchen are to be submitted with the application.
- ▶ Our goal is to complete the review for your building permit within 10 working days.

### **Application – Permit Fees:**

- ⇒ A filing fee is to be paid at time of submission of application and plans.
  - A submittal fee of **\$110.00 (to be paid at time of submittal)**
  - Additional fees for your permit to be paid at the time the permit is approved and ready to be obtained.
    - Alteration is based upon estimated cost:
    - \$4,001 to \$24,000 at \$5.85 each/1,000
    - \$24,001 on at \$2.65 each 1,000
- ⇒ **Re-inspection fee.** During the construction of your project should you fail any of the required inspections there is a re-inspection charge. The fees are due prior to certificate of occupancy. The fee schedule is as follows;
  - \$60.00 per Building Department re-inspection for all types of inspections during construction (excluding finals)
  - \$80.00 per re-inspection for all residential final inspections.
- ⇒ **Temporary certificate of occupancies.** \$80.00 is due prior to issuance of a temporary certificate of occupancy for residential.

### **General Comments:**

- \* The Permit Conditions form and stamped "FIELD COPY" of the plans are to be on the job site.
- \* A minimum of 24-hour notice is required when scheduling any inspection.
- \* All counter top service receptacles must be 20-amp GFCI protected and installed 2-feet from a break (i.e. sink, stove...) then every 4-feet thereafter and 12-inches counter top.
- \* A minimum of two (2) 20-amp branch circuits shall exist for the counter top receptacles.
- \* A separate circuit is required for a microwave.
- \* A separate circuit is required for a disposal and dishwasher.
- \* A separate circuit is required for a refrigerator.
- \* A new electric range will require 3-wire with grounding.
- \* A new kitchen stove exhaust fan shall be hard piped and discharged to exterior.
- \* A new kitchen stove is to have an anti-tip device.
- \* All fixtures to appliances are required to have their own water shut offs.
- \* It is not allowed to have the dishwasher drain connected to garbage disposal.
- \* A 2-inch drain is required to the kitchen sink.

### **Inspections:**

The following is a list of inspections, which might be required for your project.

- Framing
- Electric
- Underground Plumbing
- Rough Plumbing
- HVAC
- Insulation
- Final

### **Building Codes:**

The following are the Building Codes, which the City of St. Charles has adopted:

- St. Charles Municipal Code
- 2003 Int'l Building Code w/revisions
- 2003 Int'l Mechanical Code w/revisions
- 2002 Nat'l Electrical Code w/revisions
- 1998 IL State Plbg Code w/revisions
- 2000 Int'l Residential Code/revisions
- Fire Prevention Codes
- 2003 Int'l Fuel Gas Code w/revisions

### **Homeowner – Contractor Responsibilities:**

- ✓ It is the responsibility of the homeowner/contractor to schedule with the Building Department the required inspections. The required inspections are indicated on the Plan Review form, which is attached to your permit and the Field Copy of drawings. When calling to schedule an inspection, please have the address and the permit number.
- ✓ Inspections shall be called a minimum of 24 hours before they become due.



**CITY OF ST. CHARLES  
TWO EAST MAIN STREET  
ST. CHARLES, ILLINOIS 60174-1984**

**DEPARTMENT: BUILDING & ZONING**

**PHONE: (630) 377-4406**

**FAX (630) 443-4638**

**APPLICATION FOR CONSTRUCTION FOR BUILDING PERMITS**

**APPLICATION DATE: \_\_\_\_\_ PERMIT ISSUED \_\_\_\_\_ NO.: \_\_\_\_\_**

**PLEASE PRINT ALL INFORMATION**

**I, \_\_\_\_\_, do hereby apply for a permit for the following described  
work located at \_\_\_\_\_ Lot \_\_\_\_\_ Unit \_\_\_\_\_**

**NOTE: Is property located in the Historic Preservation District? Yes No**  
Please circle either yes or no

**Subdivision \_\_\_\_\_, Type of construction \_\_\_\_\_**

**Description of proposed work: \_\_\_\_\_**

**Square feet in building \_\_\_\_\_ Estimated cost of construction \_\_\_\_\_**

**Use of building \_\_\_\_\_ No. & Size of electric meter \_\_\_\_\_ No. & Size of water meters \_\_\_\_\_**

**Remarks \_\_\_\_\_**

**Plans \_\_\_\_\_ Specifications \_\_\_\_\_ Plat of Survey \_\_\_\_\_**

***Owner of Property***

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

***Electric Contractor***

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

***General Contractor***

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

***Concrete Contractor***

**Name: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**City: \_\_\_\_\_**

**State/Zip Code: \_\_\_\_\_**

**Phone: \_\_\_\_\_**

**Continued on reverse side**

PLEASE PRINT ALL INFORMATION

*Plumbing Contractors*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_  
IL & Registration No.: \_\_\_\_\_

*Roofing Contractors*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Illinois License No: \_\_\_\_\_  
License Expiration Date: \_\_\_\_\_

*Sewer & Water Contractor*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_

*HVAC Contractor*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_

I, the undersigned, certify that if a permit is issued to me, I will comply with all provisions of the building, plumbing, electric and other applicable ordinances of the City of St. Charles and shall perform all work, or cause all work to be performed according to the provisions of said ordinances. I, or my agent, shall personally supervise the work and shall do, or cause to have done, said work according to plans, specifications and other written information supplied as a part of this application. I am familiar with the applicable ordinances and the provision thereof and in signing this application do willingly become responsible for all work accomplished under the permit by all contractors, tradesmen and workmen, and shall call for inspections as required at a minimum of 24-hours before they become due.

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Name of actual business(s) that will occupy this space \_\_\_\_\_

REPORT OF THE BUILDING OFFICIAL

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Accepted: \_\_\_\_\_ Rejected: \_\_\_\_\_ Date: \_\_\_\_\_  
Signed: \_\_\_\_\_

For Office Use

Received \_\_\_\_\_  
Fee Paid \$ \_\_\_\_\_  
Receipt # \_\_\_\_\_

Copies of application distributed to:

Electric: \_\_\_\_\_ Engineering: \_\_\_\_\_ Fire: \_\_\_\_\_  
Meter: \_\_\_\_\_ PW: \_\_\_\_\_ Historic Preservation: \_\_\_\_\_